

S/N 10/611626



PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant:	Alfred Thomas	Examiner:	Unknown
Serial No.:	10/611626	Group Art Unit:	3713
Filed:	June 30, 2003	Docket:	47079-00214
Title:	GAMING MACHINE HAVING A PLAYER TIME-SELECTABLE BONUS AWARD SCHEME		

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**SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 *et. seq.*, the enclosed materials are brought to the attention of the Examiner for consideration in connection with the above-identified patent application. Applicant respectfully requests that this Supplemental Information Disclosure Statement be entered and the documents listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to the provisions of MPEP 609, Applicant requests that a copy of the 1449 form, initialed as being considered by the Examiner, be returned to the Applicant with the next official communication.

Pursuant to 37 C.F.R. §1.97(b), it is believed that no fee or statement is required with the Supplemental Information Disclosure Statement. However, if an Office Action on the merits has been mailed, the Commissioner is hereby authorized to charge the required fees to Deposit Account No. 502596 in order to have this Supplemental Information Disclosure Statement considered.

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The Examiner is invited to contact the Applicant's Representative at the below-listed telephone number if there are any questions regarding this communication.

Respectfully submitted,

ALFRED THOMAS

By his Representatives,

WMS Gaming, Inc.  
3401 N. California Ave.  
Chicago, IL - 60618  
(773) 961-1480

Date April 29, 2004

By Michael Blankstein  
Michael J. Blankstein  
Reg. No. 37,097

CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 29<sup>th</sup> day of April, 2004.

Pamela K. Lowenthal  
Name

Pamela K. Lowenthal  
Signature

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

(Use as many sheets as necessary)

**Complete if Known**

Examiner Name	Unknown
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Sheet 1 of 1

Attorney Docket No: 47079-00214

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OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

DATE CONSIDERED

Substitute Disclosure Statement Form (PTO-1449)

\* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional) 2 Applicant is to place a check mark here if English language Translation is attached